| Name of Organization: Willie White Park Focu | us Group |
|---|--|
| Street/Mailing Address: 3227 Flaxton Street, F | Pomona, CA 91767 |
| Daytime Phone Number: (626) 806-5501 | |
| Is Organization Registered as a 501(c): YES | NO |
| Tax ID of Group or Individual receiving payment: 41-2 | |
| | (Tax ID number is required prior to issuance of donation.) |
| TOTAL FUNDING REQUESTED BY ORGANIZATION: | \$2,600 |
| TOTAL FUNDING REQUESTED BY COUNCILMEMBE | TDD |
| IS USE OF THE CITY SEAL BEING REQUESTED? | YES NO |
| PROMOTION OF EVENT ON ELECTRONIC READER | BOARD: YES NO |
| How will the Donation/Sponsorship be used? (The donation benefiting an individual or private organization.) | |
| Donation will be used for labor, sound equipment, chairs, ta for the Willie White Focus Group's Annual Cultural Festival. | |
| | |
| | |
| What is the benefit to the City of Pomona? (An expenditure agency that is making the expenditure.) The purpose of the event is to bring all cultures in the City together. | |
| food, crafts and games. It is a family event, and all are encoura | |
| | |
| I, Mayor/Councilmember Rubio Gonzalez Distr | rict No, hereby request that the above donation/payment |
| be made and that a finding of public benefit be determined by | the City Council. |
| Account Number: 101-1302-52101-00000 | Council Meeting Date: |
| LL & Homil | 9/20/18 |
| Mayor/Councilmember Approval | Date: |



CITY OF POMONA - COMMUNITY SERVICES

INVOICE

Name of Event: Willie White Annual Cultural Festival Contact: M. Joyce Bakersmith, Event Coordinator

Date: Saturday, October 20, 2018 Location: Willie White Park Time: 1:00 p.m. to 5:00 p.m. Remit Payment to: City of Pomona P.O. Box 660 Pomona, CA 91769 Tel. (909) 620-2321 Fax (909) 624-8752

| Mobile Stage | Cost | Unit | Qty | 7 | Total |
|---------------------------------|----------------|---------------|-----|----|----------|
| Mobile Stage Refundable Deposit | \$ 1,000.00 | rental | 1 | \$ | 1,000.00 |
| Mobile Stage Delivery | \$ 280.00 | per day | 1 | \$ | 280.00 |
| Mobile Stage First Three Hours | \$ 400.00 | first 3 Hours | 1 | \$ | 400.00 |
| Mobile Stage Additional Hour | \$ 50.00 | per day | 1 | \$ | 50.00 |

Total Cost: \$ 1,730.00

| Equipment | Cost | | Unit | Qty | Total | |
|--------------------------------|------|----------|---------|-----|-------|--------|
| Portable Audio System on Stage | | \$ 50.00 | per day | 1 | \$ | 50.00 |
| Tables | | 5.00 | per day | 40 | \$ | 200.00 |
| Chairs | | 1.00 | per day | 150 | \$ | 150.00 |
| Canopies | | \$ 25.00 | per day | 10 | \$ | 250.00 |
| Extra Trash Boxes | | 5.00 | per day | 5 | \$ | 25.00 |

Total Equipment: \$ 675.00

| Staff | Staff | Rate | Unit | Hours | | Total |
|--|-------|-------------|----------|-------|------|--------|
| Full-Time Custodian 7am -12pm 1pm - 6p | 1 | \$ 22.50 | per hour | 10 | \$ | 225.00 |
| Full- Time Custodian (OT) 6pm-7pm | 1 | \$ 33.75 | per hour | 1 | \$ | 33.75 |
| Part Time Custodian 7am - 12pm | 3 | \$ 15.00 | per hour | 15 | \$ | 225.00 |
| Part Time Custodian 12pm - 7pm | 3 | \$ 15.00 | per hour | 15 | 1 \$ | 225.00 |

Total Equipment: \$ 708.75

*Refundable Deposit must be paid by applicant

Total Event Cost: \$ 3,113.75 Less Deposit: \$ 1,000.00

TOTAL: \$ 2,113.75

| Name of Organization: NAMI (National Alliance on Mental Illness) Pomona Valley |
|--|
| Street/Mailing Address: 3115 N. Garey Avenue, Pomona, CA 91767 |
| Daytime Phone Number: 909-625-2383 |
| Is Organization Registered as a 501(c): YES NO |
| Tax ID of Group or Individual receiving payment: 95-3935762 |
| (Tax ID number is required prior to issuance of donation.) |
| TOTAL FUNDING REQUESTED BY ORGANIZATION: \$1,000 |
| TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBD |
| IS USE OF THE CITY SEAL BEING REQUESTED?YESNO (Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.) |
| PROMOTION OF EVENT ON ELECTRONIC READERBOARD:YESNO |
| How will the Donation/Sponsorship be used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.) |
| All services are provided at no charge. The donation to the NAMI Walk is one of our primary fundraising vehicles |
| which allow us to maintain free services. Funds specifically are used for volunteer stipends, purchase and |
| copying of required materials and refreshments for attendees. |
| What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.) NAMI is the largest grassroots mental health organization in the United States, advocating for those with serious mental illness and their families. |
| NAMI Pomona Valley provides Pomona residents with education, support, coping & advocacy skills for caregivers and those who live with a |
| mental illness along with referral line assistance and outreach to primary, secondary and post-secondary schools as well as to faith communities. |
| I, Mayor/Councilmember Rubio Gonzalez, District No, hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council. |
| Account Number: 101-1302-52101-00000 Council Meeting Date: 10/15/18 |
| Mayor/Councilmember Approval Date: 9/20/18 |

10/8/18

REQUEST RECEIVED BY BY ADMINISTRATION ON ___

CITY OF POMONA

| Name of Organization: Progressive Christians Uniting |
|---|
| Street/Mailing Address: PCU Office, 259 S. Indian Hill, Claremont, CA 91711 attn: Verity Carda |
| Daytime Phone Number: (909) 542-9551 (office); (909) 641-8914 (cell) |
| Is Organization Registered as a 501(c):YESNO |
| Tax ID of Group or Individual receiving payment: 95-4643127 |
| (Tax ID number is required prior to issuance of donation.) |
| TOTAL FUNDING REQUESTED BY ORGANIZATION: \$3,000 |
| TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): \$600 |
| IS USE OF THE CITY SEAL BEING REQUESTED?YESNO (Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.) |
| PROMOTION OF EVENT ON ELECTRONIC READERBOARD: YES NO |
| How will the Donation/Sponsorship be used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.) These funds will be applied to expenses to hold a 2-18-2019 conference entitled "Pomona Reawakening: |
| Celebrating Milestones and Taking It to the Next Level". This donation will be applied to the speaker costs. |
| |
| |
| What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.) |
| A full description of the the conference is included in the attached correspondence from Dick Bunce. |
| he 200 target participants will be Pomona leaders, residents, volunteers and concerned community members. |
| I. Mayor/Councilmember |
| be made and that a finding of public benefit be determined by the City Council. |
| Account Number: 101-1302-52107-00000 Council Meeting Date: 10/15/18 |
| 1. |
| Mayor/Councilmember Approval Date: 10/8/2018 |

Richard R. Bunce 380 Adams Avenue Pomona, CA 91767

October 8, 2018

Dear Honorable Mayor Sandoval and Honorable City Council Members:

Re: Request for Finding of Public Benefit to Sponsor a Conference, "Pomona Reawakening"

An organization I represent, Progressive Christians Uniting, is the organizing sponsor for a conference on February 18, 2019, entitled, "Pomona Reawakening: Celebrating Milestones and Taking It to the Next Level". This event's organizers and keynoters understand that Pomona City leadership has taken significant steps forward in backing SB54, adopting Pomona's *California Values Act Ordinance*, officially joining the Compassionate Cities movement, creating the *Hope for Home* service center for homeless neighbors, plus other socially sensitive accomplishments. Such steps can be celebrated and built upon while remaining challenges are addressed.

Keynoters at the conference will be Mayor Tim Sandoval and Mr. Azim Khamisa. Mr. Khamisa has received national recognition for his remarkable compassion in the wake of a devastating personal tragedy.* The conference will feature workshop panels on topics such as homelessness, immigration, the justice system, youth, affordable housing, and sustainability.

The purpose of the gathering is to foster a more informed, engaged community with a strengthened heart for just change and social improvement. The event targets civic-minded residents and friends of Pomona. The venue is Temple Beth Israel, starting at 8:30 a.m. and ending at midday.

My request is for City Council to provide \$3,000 of financial support to this event and thereby affirm and extend the City's commitment to the Charter of Compassion. The goal of the conference is to explore ways to improve our ability as residents to hear, care, and do something about the concerns and sufferings of our neighbors. Mr. Khamisa exhibits the example of leadership that we can personally apply through volunteerism, advocacy, and everyday decisions to be compassionate toward one another in the face of disagreement. This compassionate approach to civic interaction is now expressed at the top of each agenda for City Council meetings, and the conference will hold to this standard.

My expectation is that this event will embody - to a high degree - the function of human relations commissions that exist in cities and counties throughout our region. I have attached a completed Donation and Finding of Public Benefit Request form. I hope the Mayor and Council can each contribute a few hundred dollars to support this event, and that other projects and events building upon compassion will become part of the annual City program budget.

Sincerely,

Dick Bunce

* You can learn more about Mr. Khamisa at the following link: https://www.ted.com/talks/azim_khamisa_and_ples_felix_what_comes_after_tragedy_forgiveness?language=en

REQUEST RECEIVED BY BY ADMINISTRATION ON 10/9/18

CITY OF POMONA

ASSOCIATED GROUP Seasonal Display

October 5, 2018

Matthew Sampson Facilities Maintenance Supervisor City of Pomona 505 S. Garey Ave. Pomona, CA 91766

REFERENCE# 909-620-2398

FAX#

Email: matthew_sampson@ci.pomona.ca.us

FOR: 505 S. Garey Ave.

YEAR PURCHASE DISPLAY PROPOSAL

Multi-Colored Holiday lighting program with Season Greeting sign on side of library, RGB Tree Up-Lighting installed in upper branches of trees, LED Tree of Lights on top of City Hall and 16" Red Glitter Bow Accent Kits.

| LOCA | TION | | |
|------|------------------------------|---|--|
| 1 | 25' | 25' Tree of Lights with multi-colored C9 LED lights installed on top of | City Hall |
| 1 | 40' | Purchase Price 5'7" x 40' LED lit Season Greeting sign | \$9800.00ea |
| 8 | 12" | Purchase Price RGB Washes for tree Up-Lighting | \$10,980.00ea |
| 13 | 24" | Purchase Price 24" Red Glitter Bow Accent Kits with 9' undecorated garland with Warr | \$395.00ea. m White LED |
| 12 | 25' | Purchase Price 12 – Extra 5mm Warm White LED mini lights for maintenance. | \$499.00ea |
| 1 | IRS | Purchase Price Installation, Removal and Storage of Customer Owner Decor | \$14.95.00ea |
| 1 | REFU | Price – Non-Taxable All new décor. No refurbishment needed. | \$7,816.75 |
| | | Price | \$0.00 |
| | TOTAL will be appli AL | ed (9.5%) | \$38,423.15 \$3,045.34 \$41,468.49 |

PURCHASE & INSTALLATION AGREEMENT

505 S. Garey Ave.

- 1) A deposit of 50% of the price along with a Purchase Order (if applicable) must be received by October 31, 2018 in order to guarantee installation date and product availability. Balance will be due by January 7, 2019.
- 2) The requested installation period for this project is November 22 25 2018. The requested take-down period is January 4 9, 2019. These dates have been tentatively reserved and will be secured with the deposit (as above).
- 3) Dates and pricing are secured through October 31, 2018.
- 4) This contract includes décor, installation and removal.
- 5) Term of contract is ONE season. Client owns all décor listed in design proposal.
- 6) Client responsibilities include:

Providing engineering support as requested.

Providing a secure environment for duration of holiday installation.

Providing onsite client representative as requested. Provide rental equipment as requested.

7) Associated Group responsibilities include:

Lighting will be installed with pre-determined calculations of available power. Additionally, all electrical codes and safety procedures will be followed.

Great caution will be taken to ensure that no client property is damaged.

Any Associated staff member operating equipment will be properly licensed.

Associated Group holds a CA C27 landscape contractors license, workers compensation, auto, general liability and excess liability coverage.

505 S. Garey Ave.

- 8) Any damage caused by acts of nature will, with client's approval, be billed at a time and materials rate.
- 9) Any client requested changes must be submitted in writing and will innate a revised or separate proposal.
- 10) The design concepts and pricing presented in this proposal are the intellectual property of Associated Group and may not be copied or shared with competitors.
- 11) To the extent of any conflict between the terms of this proposal and the terms of any other agreement between the parties related hereto, the terms of this proposal shall control.
- Client hereby release and shall indemnify, defend and hold harmless Associated Group and it's respective subsidiaries and affiliates and the officers, agents, employees, successors, and assigns and authorized representatives of all the forgoing, from and against all claims, actions, demands, damages, liabilities, or losses including attorney's fees (herein after "Claims") arising after the completion of the installation which are related to the maintenance, procession or control of the installed products or materials, including, without limitation, those Claims directly or indirectly caused or contributed to on a whole or in part by any act or omission of Client, its subcontractors or anyone acting under its direction or control or on its behalf in connection with or incidental to the performance of the maintenance; provided, however, that the forgoing shall not apply to the extent the Claims are caused by the gross negligence or willful misconduct of the party released, indemnifies or holds harmless.

This agreement is accepted by:

Project Name

| Ву: | Date: |
|----------------------|-----------------------|
| Title: | |
| The Associated Group | |
| By: | Date: October 7, 2018 |

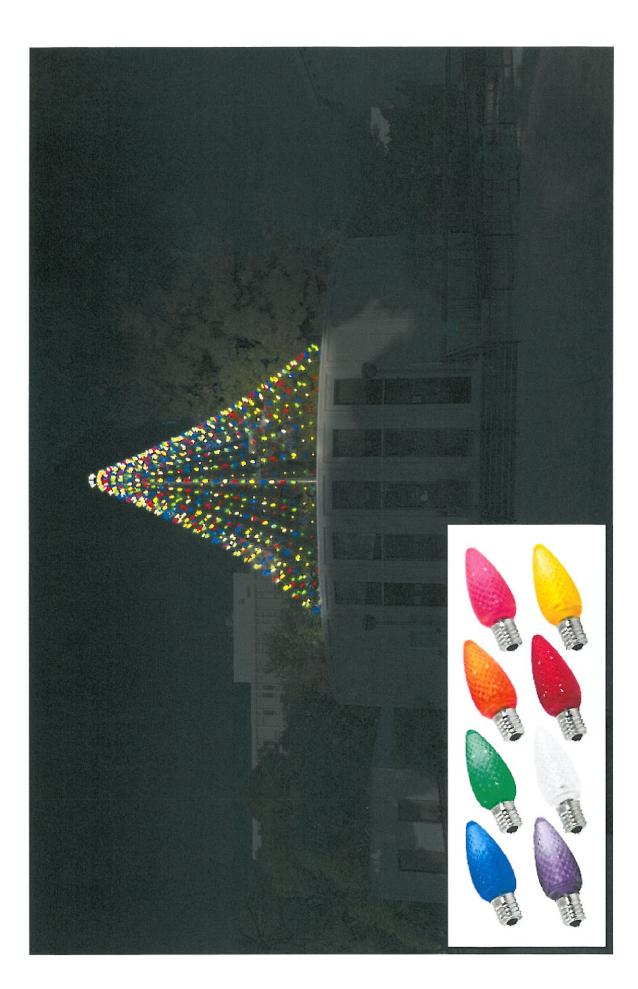
LeeRoy Chaffin II

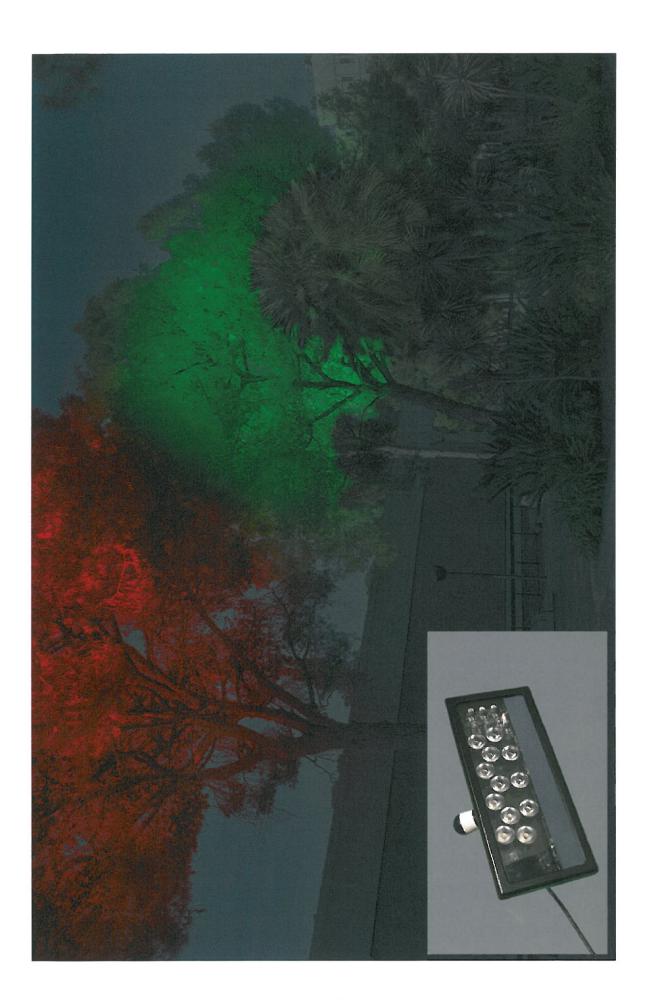
Director

ASSOCIATED GROUP

2018 Holiday Proposal for City of Pomona Conceptual Proposal







REQUEST RECEIVED BY BY ADMINISTRATION ON 10/9/18

CITY OF POMONA

| Name of Organization: Day One/Pomona Valley Runners |
|--|
| Street/Mailing Address: 1351 S. Main Street, Pomona, CA 91768 |
| Daytime Phone Number: (424) 333-1142 |
| Is Organization Registered as a 501(c): YES NO |
| Tax ID of Group or Individual receiving payment: 95-4172246 |
| (Tax ID number is required prior to issuance of donation.) |
| TOTAL FUNDING REQUESTED BY ORGANIZATION: \$4,000 |
| TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBD |
| S USE OF THE CITY SEAL BEING REQUESTED? YES NO [Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.) |
| PROMOTION OF EVENT ON ELECTRONIC READERBOARD:YESNO |
| How will the Donation/Sponsorship be used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.) The Pomona 5K is an annual event that brings residents together and brings awareness to health and |
| physical activity. The event requires a traffic control plan, police presence, event insurance, EMT and |
| equipment. The funds will do to cover these operational costs. |
| What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.) The event is targeted toward Pomona residents. There is a reduced price for youth. The price for registration is |
| signicantly lower so that we can ensure participation for more people. These funds help us ensure that the event |
| continues and the price stays low. |
| , Mayor/Councilmember Tim Sandoval , District No. 7 , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council. |
| Account Number: 101-1302-52107-00000 Council Meeting Date: 10/15/18 |
| Mayor/Councilmember Approval Date: 10/9/18 |

| REQUEST RECEIVED BY | 0100110 |
|----------------------|---------|
| BY ADMINISTRATION ON | 9/20/18 |

| lame of Organization: FASTSIGNS |
|--|
| treet/Mailing Address: 3503 W. Temple Avenue, Suite E |
| Daytime Phone Number: (909) 598-9111 |
| |
| |
| ax ID of Group or Individual receiving payment: 82-0740880 |
| (Tax ID number is required prior to issuance of donation.) |
| TOTAL FUNDING REQUESTED BY ORGANIZATION: \$500 |
| TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBD |
| S USE OF THE CITY SEAL BEING REQUESTED? YES NO Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.) |
| PROMOTION OF EVENT ON ELECTRONIC READERBOARD:YESNO |
| How will the Donation/Sponsorship be used? (The donation must primarily serve a public purpose, as opposed to solely enefiting an individual or private organization.) Funding will be used to purchase 50 signs for the Compassionate Cities "Welcome Your Neighbors" project. |
| What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of the public igency that is making the expenditure.) The City of Pomona as a "Compassionate City," aims to bring communities together to address issues in compassionate ways. The "Welcome You Neighbors" project reminds us of the diversity in our City, and encourages |
| people to be a welcoming presence to those from different places. |
| Mayor/Councilmember Tim Sandoval, District No. 7, hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council. |
| Account Number: 101-1302-52107-00000 Council Meeting Date: 10/1/2018 |
| Mayor/Councilmember Approval Date: 9/20/18 |

REQUEST RECEIVED BY BY ADMINISTRATION ON 10/1/18

CITY OF POMONA

| Name of Organization: Decker Elementary School |
|---|
| Street/Mailing Address: 20 Village Loop Road, Pomona, 91766 |
| Daytime Phone Number: (909) 397-4581 |
| Is Organization Registered as a 501(c): YES NO |
| Tax ID of Group or Individual receiving payment: 95-3870948 |
| (Tax ID number is required prior to issuance of donation.) |
| TOTAL FUNDING REQUESTED BY ORGANIZATION: \$400 |
| TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): \$400 |
| IS USE OF THE CITY SEAL BEING REQUESTED?YESNO (Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.) |
| PROMOTION OF EVENT ON ELECTRONIC READERBOARD:YESNO |
| How will the Donation/Sponsorship be used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.) |
| Funds will be used to support Decker Elementary School's 2016 Red Ribbon Week Kick-Off Assembly. |
| |
| |
| What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.) |
| Red Ribbon Week is an alcohol, tobacco and other drug and violence prevention awareness campaign. |
| |
| I, Mayor/Councilmember Ginna Escobar , District No. 5 , hereby request that the above donation/payment |
| be made and that a finding of public benefit be determined by the City Council. |
| Account Number: 101-1302-52105-00000 Council Meeting Date: 10/1/18 dais |
| 0.551 |
| Mayor/Councilmember Approval Date: 10/1/18 |

| REQUEST RECEIVED BY | |
|----------------------|--------|
| BY ADMINISTRATION ON | 9/4/18 |

| Name of Organization: Latino Art Museum | |
|--|--|
| Street/Mailing Address: 281 S. Thomas Street, P | omona, CA 91766 |
| Daytime Phone Number: (909) 484-2618, (909) 6 | 20-6009 |
| Is Organization Registered as a 501(c): YES NO | |
| 91-217 | 2533 |
| Tax ID of Group or Individual receiving payment: 91-217 | |
| (Tax | ID number is required prior to issuance of donation.) |
| TOTAL FUNDING REQUESTED BY ORGANIZATION: TB | D TOD |
| TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S |): <u>IBD</u> |
| IS USE OF THE CITY SEAL BEING REQUESTED? (Limited to print on informational material related to specific | YES V NO |
| PROMOTION OF EVENT ON ELECTRONIC READERBOA | ARD: YES NO |
| How will the Donation/Sponsorship be used? (The donation must benefiting an individual or private organization.) This donation will support the International Yearbook and Exhib | |
| | |
| | |
| | A STATE OF THE STA |
| What is the benefit to the City of Pomona? (An expenditure of agency that is making the expenditure.) | |
| In celebration of Hispanic Heritage Month, this event will continue to nour community and instill a sense of appreciation for art in the m | |
| members. | and floated of Fortional Scott and The Scott |
| | 0 |
| I, Mayor/Councilmember Cristina Carrizosa , District | |
| be made and that a finding of public benefit be determined by the | City Council. |
| Account Number: 101-1302-52103-00000 | Council Meeting Date: 9/17/18 |
| Cristina N. Carrigosa | Date: 9/4/18 |
| Mayor/Councilmember Approval | E M F C I |



BOATO OF DIRECTORS

President, Founder Graciela H. Nardi, BFA

Secretary David Pion-Berlin, Ph.D.

Treasurer lesus Molina

ADVISORY CONGRITTEE

Juan Carlos Border

Carlos A. Home

Maias Nardi

Rosa Elena Osucka

August 26, 2018

Cristina Carrizosa – District 3 Pomona City Hall 505 South Garey Ave Pomona, CA 91766

Dear Cristina:

On behalf of the Board of Directors of Latino Art Museum, we invite your organization to help us build the "Yearbook 2018". The book will be publish during the month of November 2018 and the exhibition will take place during the month of November at the Latino Art Museum, 281 S. Thomas St., in the Art Colony Pomona. The exhibition will present art works from a large number of Latin American artists During those months, the selected Latin American artists from all over the world will engage in creative activity while interacting with local residents and children through art. The artists are scheduled to participate in cultural exchange programs, forums, workshops, lectures, movies and musical events to interact with students and young artists.

Authorities from the Inland Empire, and Southern California including General Consuls from Latin America will be invited, to the Second Saturday Art Walk and Opening Reception, November 10 2018. 6pm-9pm The Latino Art Museum will send a Press Release through Internet to newspapers, magazines, artists, galleries, museums and public, plus printing 1000 four color "Yearbook 2018" and Invitations Latin American renowned musicians and several community organizations will support this unique event.

Our organization is in great need of support from your business. The Latino Art Museum is a non-profit organization created to promote the works of talented Latin American artists living in the United States and instill a sense of appreciation for Latino art in the minds and hearts of children and adults. The Latino Art Museum was established in 2001 to transform the Art Colony Pomona, the city with the largest and most diverse Latino population into a vibrant international city of Latin American art.

As director and founder of Latino Art Museum, I look forward working with you to make a first class "Yearbook 2018", invitations and event. We appreciate your contribution in advance. Your effort will be appreciated and I will be very grateful to hear your thoughts and advice on this matter. We cordially invite you to join us in supporting the "Yearbook 2018" and the exhibition

Sincerely,

Graciela Nardi

President and Founder

| REQUEST RECEIVED BY | -1. | 1,0 |
|----------------------|------|-----|
| BY ADMINISTRATION ON | 9/11 | 18 |

| Name of Organization: The African American Museum of Beginnings | |
|--|------------|
| Street/Mailing Address: 1460 E Holt Ave Ste 188 | |
| Daytime Phone Number: 909-620-2841 | |
| | |
| Is Organization Registered as a 501(c): YESNO | |
| Tax ID of Group or Individual receiving payment. 47-4747572 | |
| (Tax ID number is required prior to issuance of don | ation.) |
| TOTAL FUNDING REQUESTED BY ORGANIZATION: TBD | مويد ف |
| TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): | |
| IS USE OF THE CITY SEAL BEING REQUESTED?YESNO (Limited to print on informational material related to specific event. No commercial use of City Seal Perm | itted.) |
| PROMOTION OF EVENT ON ELECTRONIC READERBOARD:YESNO | |
| How will the Donation/Sponsorship be used? (The donation must primarily serve a public purpose, as opposed benefiting an individual or private organization.) | to solely |
| The African American Museum of Beginnings is a virtually self-funded community museum that inspires and educates all on the history, culture, and arts of African and African Americans through | |
| exhibits, programs, and community engagement. | |
| | |
| What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of agency that is making the expenditure.) We strive to connect and build relationships with Pomona community members to work side by side as partners | the public |
| to make a more prosperous community. History and culture play a vital role in the development of healthy | |
| habits, attitudes, beliefs, and expectations. History and culture is also central to effective community engagement. | |
| | |
| I, Mayor/Councilmember Tim Sandoval , District No. 7 , hereby request that the above donation | m/payment |
| be made and that a finding of public benefit be determined by the City Council. | |
| Account Number: 101-1302-52107-00000 Council Meeting Date: 9/17/18 | |
| | |
| Mayor/Councilmember Approval Date: 9/11/18 | |
| mayor/Counciliner Approvat | |

FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT THE COUNCIL MEETING DATE OF: 9/10/18 - PBOC

| Additional contributions by Council men | ibers: | | |
|---|---------------|---------|---------|
| Ful F. Hongily | Date: 9/16/18 | Amount: | \$100 |
| D-1 Councilmember Approval | | | |
| Iduar Topledis | Date: 9/10/18 | Amount: | \$1,000 |
| D-2 Councilmember Approval | | | |
| Cristina N. Carrizosa | Date: 9/11/18 | Amount: | \$100 |
| D-3 Councilmember Approval | | | |
| | | | |
| | Date: | Amount: | |
| D-4 Councilmember Approval | | | |
| | | | |
| | Date: | Amount: | |
| D-5 Councilmember Approval | | | 5 |
| | | | |
| | Date: | Amount: | |
| D-6 Councilmember Approval | | | |
| | Date: | Amount: | l. |
| Mayor's Approval | | | - |

FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT THE COUNCIL MEETING DATE OF:

9/10/18 - Mothers Helping Others

| Additional contributions by Council members: | | |
|--|-----------------------------|--|
| Ful F. Honzily | Date: 9/16/18 Amount: \$100 | |
| D-1 Councilmember Approval | | |
| D-2 Councilmember Approval | Date: 9/10/18 Amount: \$100 | |
| | Date: 9/11/18 Amount: \$100 | |
| D-3 Councilmember Approval | | |
| D-4 Councilmember Approval | Date: Amount: | |
| D-5 Councilmember Approval | Date: Amount: | |
| | | |
| | Date: Amount: | |
| D-6 Councilmember Approval | | |
| 7. | Date: 9/18/18 Amount: \$100 | |
| Mayor's Approval | | |

FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT THE COUNCIL MEETING DATE OF:

9/10/18 - Sacred Heart

| Additional contributions by Council men | nbers: Date: 9/16/18 | Amount | \$150 |
|---|----------------------|---------|---------|
| D-1 Councilmember Approval | Date: | Amount: | |
| | | | |
| Lauran top ledis | Date: 9/10/18 | Amount: | \$2,000 |
| D-2 Councilmember Approval | , | | |
| | | | |
| | Date: | Amount: | |
| D-3 Councilmember Approval | | | |
| | | | |
| | Date: | Amount: | 2.00 |
| D-4 Councilmember Approval | | | |
| | | | |
| | Date: | Amount: | |
| D-5 Councilmember Approval | | | |
| | | | |
| | | | |
| | Date: | Amount: | |
| D-6 Councilmember Approval | | | |
| Time | Date: 9/18/18 | Amount: | \$250 |
| Mayor's Approval | | | |

FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT THE COUNCIL MEETING DATE OF:

9/10/18 - Diamond Ranch High School

| Additional contributions by Council men | nbers: |
|---|--|
| Ful F. Honzily | Date: 9/16/18 Amount: \$150 |
| D-1 Councilmember Approval | |
| Laura fobledes | Date: 9/10/18 Amount: \$150 |
| D-2 Councilmember Approval | ** *********************************** |
| Cristina N. Carrizosa D-3 Councilmember Approval | Date: 9/11/18 Amount: \$100 |
| D-3 Councilmember Approval | |
| | |
| D-4 Councilmember Approval | Date: Amount: |
| 2 Counciliant TippToval | |
| | |
| D-5 Councilmember Approval | Date: Amount: |
| - PPI O | |
| | |
| D-6 Councilmember Approval | Date: Amount: |
| Til | Date: 9/18/18 Amount: \$250 |
| Mayor's Approval | |

FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT THE COUNCIL MEETING DATE OF:

9/10/18 - CA Panthers Youth Sports, Inc.

| Additional contributions by Council men | Date: 9/16/18 Amount: \$150 |
|---|-------------------------------|
| D-1 Councilmember Approval | Amount. |
| 1 | Date: 9/10/18 Amount: \$250 |
| D-2 Councilmember A'pproval | |
| Cristina N. Carrizosa D-3 Councilmember Approval | Date: 9/11/18 Amount: \$100 |
| D-3 Councilmember Approval | |
| | |
| | Date: Amount: |
| D-4 Councilmember Approval | |
| | Date: 9/17/18 Amount: \$1,050 |
| D-5 Councilmember Approval | |
| | |
| | Date: Amount: |
| D-6 Councilmember Approval | |
| Til | Date: 9/18/18 Amount: \$250 |
| Mayor's Approval | |